

VILLAGE OF BARRINGTON
APPLICATION FOR LICENSE TO SELL LIQUOR

May 1, 2005 through April 30, 2006

For Office Use Only:			
Liquor License No.			
Business Name			
Type	Amount	Date/Check No.	Code
Application Fee			L31
License Fee			L35
Administrator			

Application Fees

- The application fee for a current license holder who wishes to renew an existing license at the same location is \$100 per license
- The application fee for each Class X and XI is \$25.00
- For a new liquor license applicant who does not currently hold a liquor license from the Village, an initial, non-refundable application fee of \$500 is required

License Fees

- License fees are as follows:

Class I	\$2,000	(Bar Stools Allowed)
Class II	\$2,500	(Packaged Goods/Consumption Off Premises Only)
Class IIA	\$2,250	(Packaged Goods/Consumption Off Premises Only)
Class III	\$1,750	(Restaurant Primary Business/No Bar Stools)
Class V	\$ 25/day	(Not-for-profit special event – For up to a maximum of four days)
Class VI	\$1,500	(Restaurant Primary Business/No Bar Stools/Beer and Wine Only)
Class VII	\$1,000	(Outdoor Café License/Must Hold Class I or Class III)
Class VIII	\$2,000	(Remote Orders)
Class IX	\$ 100	(Catering)
Class X	\$ 100	(Temporary Off Site)
Class XI	\$ 100	(Service of Table Wine Not Purchased on Premises/Must Hold Class III, VI, or VII)
- License fees for renewal application are due at time of application. Prorated license fee for a new applicant is due two (2) weeks before business opens.

TO THE LIQUOR CONTROL COMMISSIONER OF THE VILLAGE OF BARRINGTON, ILLINOIS: The undersigned hereby makes application and submits these application fees and license fees in the total amount of \$_____ for a Class _____ Liquor License under the provisions of the Village of Barrington Village Code for the term ending April 30, 2006, and hereby certifies to the following facts:

	Renewal Application		New/Initial Application	
	License Fee	App. Fee	License Fee	App. Fee
Class I	_____	_____	_____	_____
Class II	_____	_____	_____	_____
Class III	_____	_____	_____	_____
Class IV	_____	_____	_____	_____
Class V	_____	_____	_____	_____
Class VI	_____	_____	_____	_____
Class VII	_____	_____	_____	_____
Class VIII	_____	_____	_____	_____
Class IX	_____	_____	_____	_____
Class X	_____	_____	_____	_____
Class XI	_____	_____	_____	_____
TOTAL	\$_____	\$_____	\$_____	\$_____

1. THE APPLICANT SEEKS A LIQUOR LICENSE(S) FOR THE FOLLOWING BUSINESS AND PREMISES:

A. _____
 Exact name business is conducted under _____ Principal kind of business _____

 Street address (including floor, room, etc.) _____ Telephone number _____

B. Is the applicant a (check one): ☐ Sole Proprietorship ☐ Partnership ☐ Corporation

C. Does the applicant own or lease the premises for which this license is sought:
☐ Own (provide proof of ownership) ☐ Lease (provide a copy of the lease)
 If leased, please provide:

 Name of Lessor

 Address

 City

 State

 Zip code

D. Does the lease on the premises cover the full period for which the license is sought?
☐ Yes ☐ No Period covered by lease: _____

E. Does the lease provide that the lessor will receive a percentage of profits or sales?
☐ Yes ☐ No *If yes*, please give all details: _____

F. State the distance from nearest church or school: _____

G. Illinois Municipal Retailers' Use & Service Occupation Tax Number registered to an address in the Village of Barrington (for each business, if more than one) _____

H. State Liquor License Number with expiration date (for each business, if more than one):

I. Has the applicant made application for a similar license for premises other than described in this application? ☐ Yes ☐ No

If yes, state date, location of premises and disposition of application:

2. The following information is also required of any sole proprietors, and all partners, officers, directors, and shareholders owning more than 5% of stock:

A. If the applicant is a **SOLE PROPRIETORSHIP**, please complete the following:

- Applicant's full name: _____
- Date of birth: _____ Home telephone: _____
- Business telephone: _____
- Residence address: _____
- Previous address: _____
- If not a resident of the Village of Barrington, state name and address of registered agent:

- Social security number: _____
- Driver's license number: _____
- Is applicant a U.S. citizen? Yes ☐ No ☐
Date and place of naturalization, if applicable: _____
- If not a U.S. citizen, country of citizenship: _____
- Character of business: _____
- Length of time applicant has been in business: _____

B. If the applicant is a **PARTNERSHIP**, please complete the following:

List the full name, present and previous address, date of birth, social security number, driver's license number, citizenship of all partners entitled to or receiving a share of the profits of the business:

- ➤ Applicant's full name: _____
- Date of birth: _____ Home telephone: _____
- Business telephone: _____
- Residence address: _____
- Previous address: _____
- If not a resident of the Village of Barrington, state name and address of registered agent:

- Social security number: _____
 - Driver's license number: _____
 - Is applicant a U.S. citizen? Yes ☐ No ☐
 - Date and place of naturalization, if applicable: _____
 - If not a U.S. citizen, country of citizenship: _____
 - Character of business: _____
 - Length of time applicant has been in business: _____
- ➤ Applicant's full name: _____
 - Date of birth: _____ Home telephone: _____
 - Business telephone: _____
 - Residence address: _____
 - Previous address: _____
 - If not a resident of the Village of Barrington, state name and address of registered agent: _____
 - Social security number: _____
 - Driver's license number: _____
 - Is applicant a U.S. citizen? Yes ☐ No ☐
 - Date and place of naturalization, if applicable: _____
 - If not a U.S. citizen, country of citizenship: _____
 - Character of business: _____
 - Length of time applicant has been in business: _____
- ➤ Applicant's full name: _____
 - Date of birth: _____ Home telephone: _____
 - Business telephone: _____
 - Residence address: _____
 - Previous address: _____
 - If not a resident of the Village of Barrington, state name and address of registered agent: _____
 - Social security number: _____
 - Driver's license number: _____
 - Is applicant a U.S. citizen? Yes ☐ No ☐
 - Date and place of naturalization, if applicable: _____
 - If not a U.S. citizen, country of citizenship: _____
 - Character of business: _____
 - Length of time applicant has been in business: _____

C. If the applicant is a **CORPORATION**, please complete the following:

Legal Name of Corporation: _____

Date of Incorporation (Attach copy of Articles of Incorporation): _____

State object for which corporation was organized: _____

List the names, titles, present and previous address, date of birth, social security number, driver's license number of all officers, directors and shareholders owning 5% or more of the stock of the corporation:

- > Applicant's full name: _____
 - > Date of birth: _____ Home telephone: _____
 - > Business telephone: _____
 - > Residence address: _____
 - > Previous address: _____
 - > If not a resident of the Village of Barrington, state name and address of registered agent: _____
 - > Social security number: _____
 - > Driver's license number: _____
 - > Is applicant a U.S. citizen? Yes ☐ No ☐
Date and place of naturalization, if applicable: _____
 - > If not a U.S. citizen, country of citizenship: _____
 - > Character of business: _____
 - > Length of time applicant has been in business: _____
- > Applicant's full name: _____
 - > Date of birth: _____ Home telephone: _____
 - > Business telephone: _____
 - > Residence address: _____
 - > Previous address: _____
 - > If not a resident of the Village of Barrington, state name and address of registered agent: _____
 - > Social security number: _____
 - > Driver's license number: _____
 - > Is applicant a U.S. citizen? Yes ☐ No ☐
Date and place of naturalization, if applicable: _____
 - > If not a U.S. citizen, country of citizenship: _____
 - > Character of business: _____
 - > Length of time applicant has been in business: _____
- > Applicant's full name: _____
 - > Date of birth: _____ Home telephone: _____
 - > Business telephone: _____
 - > Residence address: _____

- Previous address: _____
 - If not a resident of the Village of Barrington, state name and address of registered agent:

 - Social security number: _____
 - Driver's license number: _____
 - Is applicant a U.S. citizen? Yes ☐ No ☐
 - Date and place of naturalization, if applicable: _____
 - If not a U.S. citizen, country of citizenship: _____
 - Character of business: _____
 - Length of time applicant has been in business: _____
- ➤ Applicant's full name: _____
 - Date of birth: _____ Home telephone: _____
 - Business telephone: _____
 - Residence address: _____
 - Previous address: _____
 - If not a resident of the Village of Barrington, state name and address of registered agent:

 - Social security number: _____
 - Driver's license number: _____
 - Is applicant a U.S. citizen? Yes ☐ No ☐
 - Date and place of naturalization, if applicable: _____
 - If not a U.S. citizen, country of citizenship: _____
 - Character of business: _____
 - Length of time applicant has been in business: _____

3. Manager or Registered Agent for Business, if applicable (must be fingerprinted by the Police Dept.)

Will the business be conducted by a local manager or a registered agent? _____

Name of manager or registered agent during the previous license year:

First _____ Middle _____ Last _____

Name of manager or registered agent during the new license year:

First _____ Middle _____ Last _____

Home address

(____) _____ - _____ - _____ / ____ / ____
Home telephone Social security number Driver's license number Date of birth

Place of birth _____

Is manager or registered agent a U.S. citizen? Yes ☐ No ☐

Date and place of naturalization, if applicable: _____

If not a U.S. citizen, country of citizenship: _____

4. If a majority interest of the stock is owned by one person or his nominee, state name and address of such person(s):

Name

Address

Name

Address

5. The following information is also required of any sole proprietorship and all partners, officers, directors, and all shareholders owning more than 5% of stock:
- A. What is the present business of the applicant, where is this business located, and how long has the applicant been in that business?
 - B. If the applicant has more than one present business, state each.
 - C. If the application is a partnership, give the information for each partner.
 - D. If the applicant is a corporation, give the information for each officer, director, and shareholder owning more than 5% of the stock.

<u>Name</u>	<u>Present Business</u>	<u>Business Location</u>	<u>Years in Business</u>

6. List each and every other occupation or business with which the applicant has been associated with for 15 years prior to the date of this application and where it was located.
- A. In the case of a partnership, list such information for each partner.
 - B. In the case of a corporation, list such information for each officer, director and shareholder owning more than 5% of the stock of the corporation. (*Attach additional sheet if necessary.*)

<u>Name</u>	<u>Each Prior Business</u>	<u>Name & Street Address</u>	<u>Business Location</u>	<u>Dates</u>

7. If the applicant is now in business, whether as a sole proprietorship, partnership or corporation, and the license is to be held in connection with such business, what is the approximate value of goods, wares and merchandise on hand at this time: \$ _____
8. Has the applicant made application for a similar or other license for some other location?
Yes ☐ No ☐ *If yes*, please state the disposition of each other application. _____

9. Have you familiarized yourself with all ordinances of the Village of Barrington pertaining to the sale of alcoholic liquor and do you agree to abide by them? Yes ☐ No ☐
10. Please attach certificate of dram shop insurance coverage including name and address of insurance company for both the license and owner of the building in which the alcoholic liquor will be sold for the duration of the license.

11. Please describe the parking facilities available to the business. _____

12. Have you, or in the case of a corporation, the local manager, or in the case of a partnership, any partners, ever been convicted of any violation of any law pertaining to alcoholic liquor?
Yes ☐ No ☐ *If yes*, please give all details: _____

13. Have you, or in the case of a corporation, the local manager, or in the case of a partnership, any of the partners, ever had a liquor license revoked or suspended? Yes ☐ No ☐
If yes, please attach an additional sheet stating the reasons for such revocation or suspension and the place and dates involved.
14. Has the applicant ever been convicted of a felony, or is the applicant otherwise disqualified to receive a license by reason of the laws of the State of Illinois or the Ordinances of the Village of Barrington? If the applicant is a partnership, list such information for each partner; if the applicant is a corporation, list such information for each officer, director and shareholder owning more than 5% of the stock of said corporation.

15. List each arrest of the applicant for offenses other than traffic violations, indicating the place and date of arrest, the charge made and the final disposition of the charge. ***If none, please state none.*** If the applicant is partnership, list such information for each partner, and if the applicant is a corporation, list such information for each officer, director and shareholder owning more than 5% of the stock of said corporation.

16. Has the applicant ever filed bankruptcy proceedings? Yes ☐ No ☐

If yes, please state the date and place of such filing. _____

—

17. Has there ever been issued to the applicant, a stamp relative to the Federal Tax on wagers? _____

18. If the applicant is a partnership, has such stamp ever been issued to any partner? _____

19. If the applicant is a corporation, has such stamp ever been issued to any officer, director or shareholder owning 5% or more of the stock of said corporation? Yes ☐ No ☐

If yes, please state the date and places where said stamp was held by the applicant and the purposes for which the stamp was held. _____

20. Does the applicant agree not to allow gambling devices or gambling on the premises? Yes ☐ No ☐

21. Does the applicant agree not to violate any of the laws of the State of Illinois, of the United States, or any ordinance of the Village of Barrington in the conduct of its place of business? Yes ☐ No ☐

22. Has the applicant complied with the Employee Training Requirement contained in Section 3-28 [or 3-3-19] of the Barrington Village Code?

(The applicant must attach written evidence of compliance with these requirements, such as a legible photocopy of the BASSET Certificate or the equivalent for each employee.)

GENERAL AGREEMENTS AND UNDERSTANDINGS

The applicant hereby states that the applicant will not violate any of the laws of the State of Illinois or any Ordinance of the Village of Barrington in the conduct of the applicant's business conducted pursuant to any license issued hereunder.

The applicant understands that fingerprinting of the applicant will be conducted by the Village. In the case of a partnership, each partner will be fingerprinted, and in the case of a corporation, each officer, director and shareholder owning 5% or more of the stock of the corporation will be fingerprinted. (Fingerprinting is not required for the renewal of a license if the applicant has once been fingerprinted).

The applicant also understands that no license shall be issued until at least 30 days from the date of filing of this application and that a copy of this application will be forwarded to the Chief of Police for investigation by said Chief of Police, who shall supply a copy of his report of investigation to the President and the Board of Trustees.

The applicant further understands that if any information submitted in this application should change during the term of the liquor license, the applicant is required to notify the Village of Barrington Liquor Control Commissioner and submit to him or her an amended application containing the new information.

Date of this application: _____, _____

Signature of Applicant if Sole Proprietorship

Signature of Partner if a Partnership

Signature and Title of President or Vice-
President if Corporation

Signature of Partner if a Partnership

Signature of Corporate Secretary

NOTE: BOTH APPLICATION AND VERIFICATION MUST BE SIGNED AS FOLLOWS:
(Verification must be signed in front of a notary public.)

- Sole Proprietorship - By Owner
- Partnership - By All Partners
- Corporation - By President and Secretary

RETURN COMPLETED FORM TO: Village of Barrington Liquor Control Commissioner
Attn: Ms. Colleen Nigg
200 South Hough Street
Barrington, IL 60010

VERIFICATION

STATE OF ILLINOIS)
) SS
COUNTY OF _____)

_____, being first duly sworn upon oath, states that he has read the foregoing application for license and the answers to the above questions and knows the contents of said application, and that each of the statements in the said application contained are true in substance and in fact.

SUBSCRIBED AND SWORN TO before me
this _____ day of _____, 20____.

(S E A L)

Notary Public